

When you receive community services for mental illness, alcoholism, drug abuse or a developmental disability, you have the following rights under Wisconsin Statute 51.61(1), 51.30, Wisconsin Administrative Code HFS 92, HFS 94, and HFS124 and 42 CFR 482.13. If you require additional information regarding these rights please see a staff member and it will be provided to you.

PERSONAL RIGHTS

- You must be treated with dignity and respect, free from any verbal, physical, emotional, sexual abuse or harassment.
- You have the right to have staff make fair and reasonable decisions about your treatment and care.
- You have the right to participate in religious services and social, recreational and community activities away from the living unit to the extent possible. You may not be coerced into engaging in any religious activities.
- You may not be made to work except for personal housekeeping chores. If you agree to do other work, you must be paid, with certain minor exceptions.
- You may make your own decisions about things like getting married, voting and writing a will, if you are over the age of 18, and have not been found legally incompetent.
- You may not be treated unfairly because of your race, national origin, sex, age, religion, disability, sexual orientation, source of funding or marital status.
- Your surroundings must be kept safe and clean.
- You must be given the chance to exercise and go outside for fresh air regularly and frequently, except for health and security concerns.
- You have the right to receive treatment in a safe, psychologically and physically humane environment.

TREATMENT AND RELATED RIGHTS

- You must be provided prompt and adequate treatment, rehabilitation and educational services appropriate for your condition, within the limits of available funding.
- You must be allowed to participate in your treatment and care, including treatment planning.
- You must be informed of your treatment and care, including alternatives to and possible side effects of treatment, including medications, including who is responsible and the possible consequences of refusing treatment.
- You have the right to ask for translation to a language other than English whenever you access programs and services.

- No treatment or medication may be given to you without your written, informed consent, unless it is needed in an emergency to prevent serious physical harm to you or others, or a court orders it. (If you have a guardian, however, your guardian may consent to treatment and medications on your behalf.)
- You have the right to have the consequences of refusing treatment explained to you.
- You must be informed in writing of any costs of your care and treatment for which you or your relatives may have to pay. You have a right to examine your bill and receive an explanation of the bill, regardless of source of payment.
- You must be treated in the least restrictive manner and setting necessary to achieve the purposes of admission to the facility, within the limits of available funding.
- You have a right to be informed about your illness, cause of treatment and prognosis for recovery and to have your legally authorized representative or any other person you have authorized in writing obtain this information as well.
- You have a right to formulate Advance Directives.
- You have the right to present a grievance to your service provider without fear of retaliation.

**COMMUNICATION AND
PRIVACY RIGHTS**

- You may call or write to public officials or your lawyer.
- Except in some situations, you may not be filmed, taped or photographed unless you agree to it.
- You may use your own money as you choose, within some limits.
- You may send and receive private mail. (Staff may not read your mail unless you or your guardian asks them to do so). Staff may check your mail for contraband. They may only do so if you are watching.
- You have a right to make a reasonable number of private, personal calls.*
- You may see visitors daily.*
- You may designate who may visit.*
- You must have privacy when you are in the bathroom and while receiving care for personal needs.*
- You may wear your own clothing.*
- You must be given the opportunity to wash your clothes.*
- You may use and wear your own personal articles.*
- You must have access to a reasonable amount of secure storage space.*
- For eligible immigrants information regarding your immigration status will not be reported to any

federal agency and will not be used to discriminate against you,

*Some of your rights may be limited or denied for treatment, safety or other reasons. (See the rights with an * after them). Your wishes and the wishes of your guardian should be considered. If any of your rights are limited or denied, you must be informed of the reasons for doing so. You may ask to talk with staff about it. You may also file a grievance about any limits on your rights.

RECORD PRIVACY AND ACCESS

Under Wisconsin Statute sec. 51.30 and HFS 92, Wisconsin Administrative Code:

- Your treatment information must be kept private (confidential), unless the law permits disclosure.
- Your records may not be released without your consent, unless the law specifically allows for it.
- You may ask to see your records. You must be shown any records about your physical health or medications. Staff may limit how much you may see of the rest of your records while you are receiving services. You must be informed of the reasons for any such limits. You may challenge those reasons through the grievance process.
- After discharge, you may see your entire record, if you ask to do so. You may be charged for written copies.
- If you believe something in your records is wrong, you may challenge its accuracy. If staff will not change the part of your record you have challenged, you may put your own version in the record.

RIGHT OF ACCESS TO COURTS

- You may, instead of filing a grievance or at the end of the grievance process, or any time during it, choose to take the matter to court to sue for damages or other court relief if you believe your rights have been violated.
- If you have been placed against your will, you may ask a court to review your commitment or placement order.

GRIEVANCE RESOLUTION STAGES

Informal Discussion Process (Optional)

- An informal resolution may be possible, and you are encouraged to first talk with staff about your concerns. If it is possible, the client rights specialist or another staff member may utilize dispute mediation or conflict resolution processes to address your concerns. However, you do not have to do this before filing a formal grievance with your service provider.

Level I - Grievance Investigation

- If you want to file a grievance, you should do so within 45 days of the time you become aware of the problem. An extension of time beyond the 45-day time limit may be granted for good cause. **This time limit does not apply to your rights under HFS 124 or 42CFR 482.13. You may file your grievance verbally or in writing. If you file verbally, you must specify that you would like it to be treated as a formal grievance.**
- You may file as many grievances as you want. However, they will usually only be investigated one at a time. You may be asked to rank them in order of importance.
- A Client Rights Specialist will investigate your grievance and attempt to resolve it.
- Unless the grievance is resolved informally, the Specialist will write a report within 30 days from the date you filed the formal grievance. You will get a written copy of the report that contains:
 - Name of contact person.
 - Steps taken or on behalf of the patient to investigate the grievance.
 - Results of the grievance.
 - Date of completion.

Level II - Program Manager's Review

- The manager of the facility or the program providing your services will review the Specialist's report. If you and that manager are in agreement with the results of the report, any recommendations in it shall be put into effect. If there are disagreements, the manager shall issue a written decision within 10 days.
- You will be informed of how to appeal the program manager's decision if you disagree with it. You will have 14 days to appeal.

County Level Review

- If a county agency is paying for your services, there is an extra step available in the grievance process. You may appeal the Level II decision to the County Agency Director. The County Agency Director must issue a written decision within 30 days, with a possible extension of another 30 days.

Level III - State Grievance Examiner

- If your grievance went through the County Level Review and you are dissatisfied with the decision, then you may appeal it to the State Grievance Examiner. You have 14 days to appeal.
- If you are paying for your services yourself, or through insurance, then you may appeal the Level II decision directly to the State Grievance Examiner, skipping the County Level Review. You have 14 days to appeal.

- The address is: State Grievance Examiner, Division of Mental Health and Substance Abuse Services, DHFS 1W. Wilson St., Room 850, PO Box 7851, Madison, WI 53707-7851. Tele: 1-608-266-9369

Level IV - Final State Review

- Anyone directly affected by the Level III decision may request a final state review by the Administrator of the Division of Mental Health and Substance Abuse Services (DMHSAS). Any appeal to Level IV must be sent to the DMHSAS Administrator, PO Box 7851 Madison, WI 53707-7851, within 14 days.

If you would like to file a grievance or learn more about the grievance procedure, you should talk with staff or you should contact the **Program Administrator** listed below who is in charge of the program from which you are receiving services. A **Client Rights Specialist** will be appointed to investigate your grievance.

- ◆ Crisis Services – Amy Lorenz, 257-7482
- ◆ Acute Inpatient Adult, and Child and Adolescent Inpatient- Nancyann Marigomen, 257-7631
- ◆ Adult Community Services and Alcohol/Drug Abuse Services –Susan Gadacz, 257-7955
- ◆ Rehabilitation Center Central & Center For Independence – Michael Spitzer, 257-5782
- ◆ Wraparound Milwaukee and M.U.T.T. - Bruce Kamradt, 257-7639
- Address:
9455 Watertown Plank Road
Milwaukee, WI 53226

You may also call the BHD Patient Rights Hotline at 414-257-4868 and leave your name, phone number and a message. You can also call the Office of Consumer Affairs to speak with a Peer Specialist at 257-4807. Your call will be returned.

Disability Rights Wisconsin is an independent agency that works to protect the rights of people who receive mental health or other disability services. Tele: 1-800-708-3034, TTY: 1-888-758-6049, 6737 W. Washington St., Suite 3230, Milwaukee, WI 53214

You may also choose to communicate your concerns directly to the State of Wisconsin, Health Services Section, Division of Quality Assurance, PO Box 2969, Madison, WI 53701-2969. Main #: 1-608-266-8481 or DQA Hotline #: 1-800-642-6552

Any person may file a complaint regarding a facility staff person, a regulated healthcare facility or other DQA related issue via the DQA Complaint webpage at:

<http://dhfs.wisconsin.gov/bqaconsumer/HealthCareComplaints.htm>

If you receive Medicare, you may also request review of your medical treatment by MetaStar, 2909 Landmark Place, Madison, WI 53713
Tele: 1-608-274-1940 or 1-800-362-2320

You also have the right to file a formal complaint with a federal agency.

- Formal Discrimination Complaint about any of the above services administered by the WI Dept. of Health and Family Services.
 - U.S. Dept. of Health and Human Services
Office for Civil Rights
Region V, 233 N. Michigan Ave.
Chicago, IL 60601
Tele: 1- 312-886-2359, TDD: 315-353-5693
- Formal Discrimination Complaint about any program.
 - U.S. Dept. of Justice
Civil Rights Division
10th and Pennsylvania Ave., NW
Washington, D.C. 20530
Tele: 1-202-514-0301, TDD 800-800-3302

This facility is seeking Joint Commission Accreditation. Another option to share concerns regarding quality of care issues at this healthcare organization by patients, families, caregivers and others is by use of the following toll free number: 1-800-994-6610. Complaints can also be submitted in writing (regular mail, e-mail, fax, or via www.jointcommission.org). All reported concerns will not result in any retaliatory action.

**FOR COMMUNITY SERVICES
YOUR CLIENT RIGHTS SPECIALIST IS:
MELODY JOINER
414-257-7933**

**FOR INPATIENT SERVICES
YOUR CLIENT RIGHTS SPECIALIST IS
DESIRINE VANN
414-257-7469**

PHOTOCOPY FORM #475 R4 June 2013
COMMUNITY SERVICES BROCHURE

CLIENT RIGHTS and the GRIEVANCE PROCEDURE for COMMUNITY SERVICES



**MILWAUKEE COUNTY
BEHAVIORAL HEALTH
DIVISION**

For Clients Receiving Services in Wisconsin for
Mental Illness, Alcohol or Other Drug Abuse
Or Developmental Disabilities